

**APPENDIX C**  
**FORM OF ANNUAL NOTICE TO MEMBERS OF ALABAMA STATE BAR**

**NOTICE TO CRIMINAL DEFENSE COUNSEL**

If your client is an incarcerated criminal defendant who has been ordered to receive an inpatient mental evaluation by the Alabama Department of Mental Health (“ADMH”) or has been found incompetent to stand trial and committed to the custody of ADMH for competency restoration treatment, and you believe that your client needs emergency psychiatric treatment prior to his or her admission into an ADMH-operated facility for court-ordered psychiatric services, you may notify [INSERT ANNUAL ADMH DESIGNEE] of your client’s need for an evaluation for emergency treatment.

To request an evaluation of your client for emergency treatment, please submit a written request by regular mail, electronic mail, or fax to [INSERT ADMH DESIGNEE CONTACT INFORMATION]. In your request for an evaluation of your client, please include the following information:

- client’s name;
- the facility in which your client is incarcerated;
- your client’s criminal case number;
- the date of the order directing that your client receive an inpatient mental evaluation or on which your client was found incompetent and ordered to receive competency restoration treatment;
- a description of the symptoms of your client’s psychiatric distress, including, specifically, whether you believe that your client is suicidal; and
- your contact information.

If you believe that your client is suicidal, after contacting [INSERT ADMH DESIGNEE], please contact the sheriff of the county and officials of the jail in which your client is incarcerated and advise them of the need to implement suicide prevention measures.

If your client has a mental illness and/or intellectual disability, after contacting [INSERT AMDH DESIGNEE], you may also contact the Alabama Disabilities Advocacy Program at (205) 348-4928 for further information concerning resources to address your client’s disability beyond his or her criminal proceeding.